

No. W 100983

Due no later than Feb 28, 2013
Annual Report Form

Return to:

SECRETARY OF STATE
450 N 4th STREET
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF
RECEIVED BY DUE
DATE

1. Mailing Address: Correct in this box if needed.

DIABETES SUPPORT NETWORK, LLC
THOMAS R GAY
673 W BANKSIDE DR
EAGLE ID 83616
DENNIS McMANAMON
1390 N Cole RD
Boise ID 83704

2. Registered Agent and Office
(NOT A P.O. BOX)

THOMAS R GAY
673 W BANKSIDE DR
EAGLE ID 83616
DENNIS McMANAMON
1390 N Cole RD
Boise, ID 83704

3. New Registered Agent Signature.

DAMC

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	DENNIS McMANAMON	1390 N Cole	Boise	ID	ADA	83704
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:

IDAHO
W 100983

6.

Signature:

Name (type or print):

DENNIS McMANAMON

Date:

2-19-2013

Title:

Owner

Issued 02/19/2013 by JL1

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